

Docket No.: 023004.0104N1US

(PATENT)

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of: Michael W. Graham et al.

Application No.: 10/646070

Confirmation No.: 8796

Filed: August 22, 2003

Art Unit: 1635

For: CONTROL OF A GENE EXPRESSION

Examiner: B. Whiteman

## **AMENDMENT IN RESPONSE TO NON-FINAL OFFICE ACTION**

MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

## **INTRODUCTORY COMMENTS**

In response to the Notice of Non-Compliant Amendment dated June 22, 2006, Applicants resubmit claim 77 in proper form.

Amendments to the Claim 77 is reflected in on page 2 of this paper.

Remarks/Arguments begin on page 3 of this paper.

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| A MENT TO A NOMITTAL LETTED  |                                 |                                |                                   |                        | Docket No.<br>023004.0104N1US |  |
| Application No.<br>10/646070-Conf. #8796   |                                 | Filing Date<br>August 22, 2003 |                                   | Examiner<br>B. Whitema | Art Unit<br>n 1635            |  |
| Applicant(s): M  | lichael W. Graha                | m et al.                       |                                   |                        |                               |  |
| Invention: CONTROL OF A GENE EXPRESSION  |                                 |                                |                                   |                        |                               |  |
| TO THE COMMISSIONER FOR PATENTS  Transmitted herewith is an amendment in the above-identified application.                                       |                                 |                                |                                   |                        |                               |  |
| The fee has been calculated and is transmitted as shown below.   |                                 |                                |                                   |                        |                               |  |
| CLAIMS AS AMENDED Claims Highest   |                                 |                                |                                   |                        |                               |  |
|  | Remaining<br>After<br>Amendment | Number<br>Previously<br>Paid   | Number<br>Extra Claims<br>Present | Rate                   |                               |  |
| Total Claims   | 59                              | - 59 =                         |                                   | х                      |                               |  |
| Independent<br>Claims  | 3                               | - 3 =                          |                                   | x                      |                               |  |
| Multiple Dependent Claims (check if applicable)  |                                 |                                |                                   |                        |                               |  |
| Other fee (please specify):  |                                 |                                |                                   |                        |                               |  |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: 0.00  |                                 |                                |                                   |                        |                               |  |
| Large Entity x Small Entity  |                                 |                                |                                   |                        |                               |  |
| x No additional fee is required for this amendment.  |                                 |                                |                                   |                        |                               |  |
| Please charge Deposit Account No in the amount of \$  A duplicate copy of this sheet is enclosed.  |                                 |                                |                                   |                        |                               |  |
| A check in the amount of \$ to cover the filing fee is enclosed.   |                                 |                                |                                   |                        |                               |  |
| Payment by credit card. Form PTO-2038 is attached.   |                                 |                                |                                   |                        |                               |  |
| The Director is hereby authorized to charge and credit Deposit Account No50-2228 as described below. A duplicate copy of this sheet is enclosed. |                                 |                                |                                   |                        |                               |  |
| x Credit any overpayment.  |                                 |                                |                                   |                        |                               |  |
| Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.   |                                 |                                |                                   |                        |                               |  |
| Lacy L. Kolo, Reg. No. 55,340  |                                 |                                |                                   |                        |                               |  |
| Agent for Applicant  |                                 |                                |                                   |                        |                               |  |
| PATTON BOGGS LLP<br>8484 Westpark Drive, 9th Floor   |                                 |                                |                                   |                        |                               |  |
| McLean, Virginia 22102<br>(703) 744-8085   |                                 |                                |                                   |                        |                               |  |
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